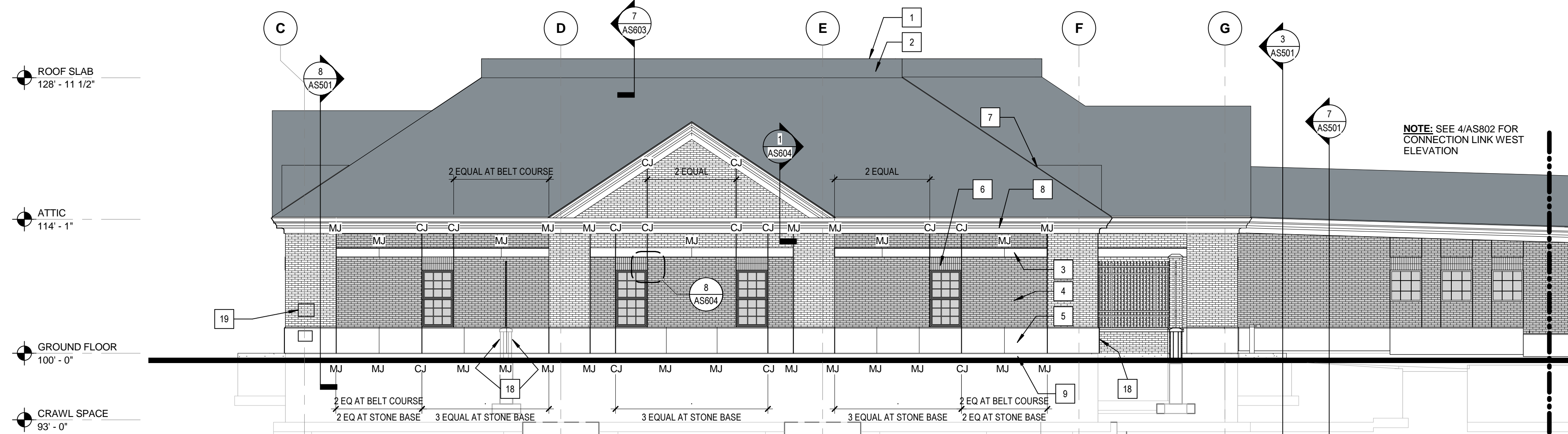
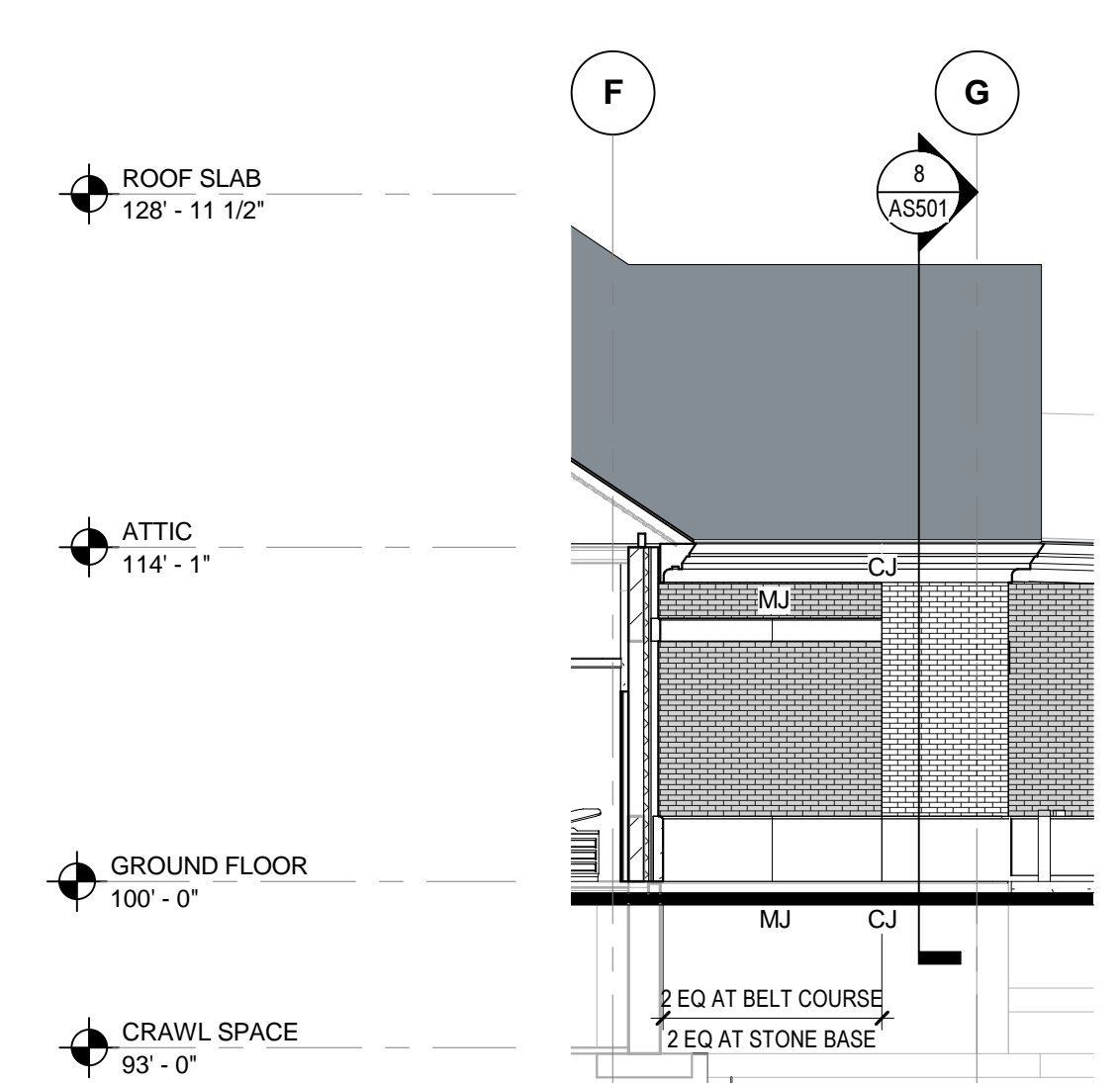


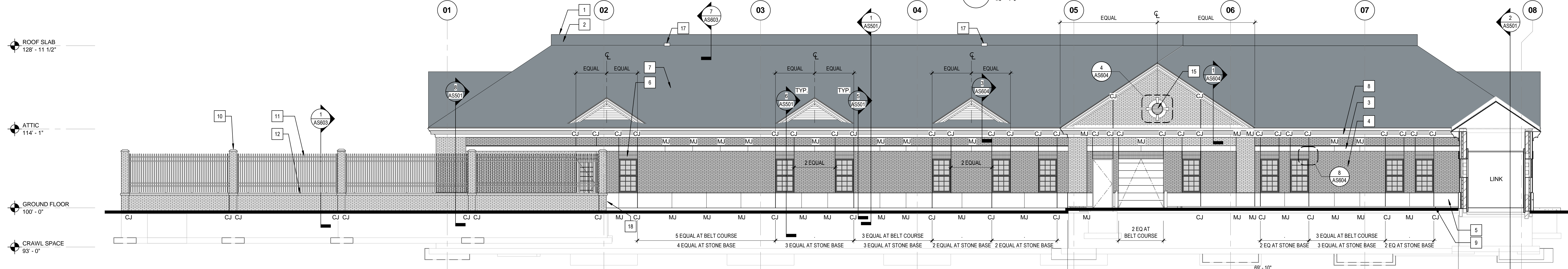
1 NORTH ELEVATION  
1/8" = 1'-0"



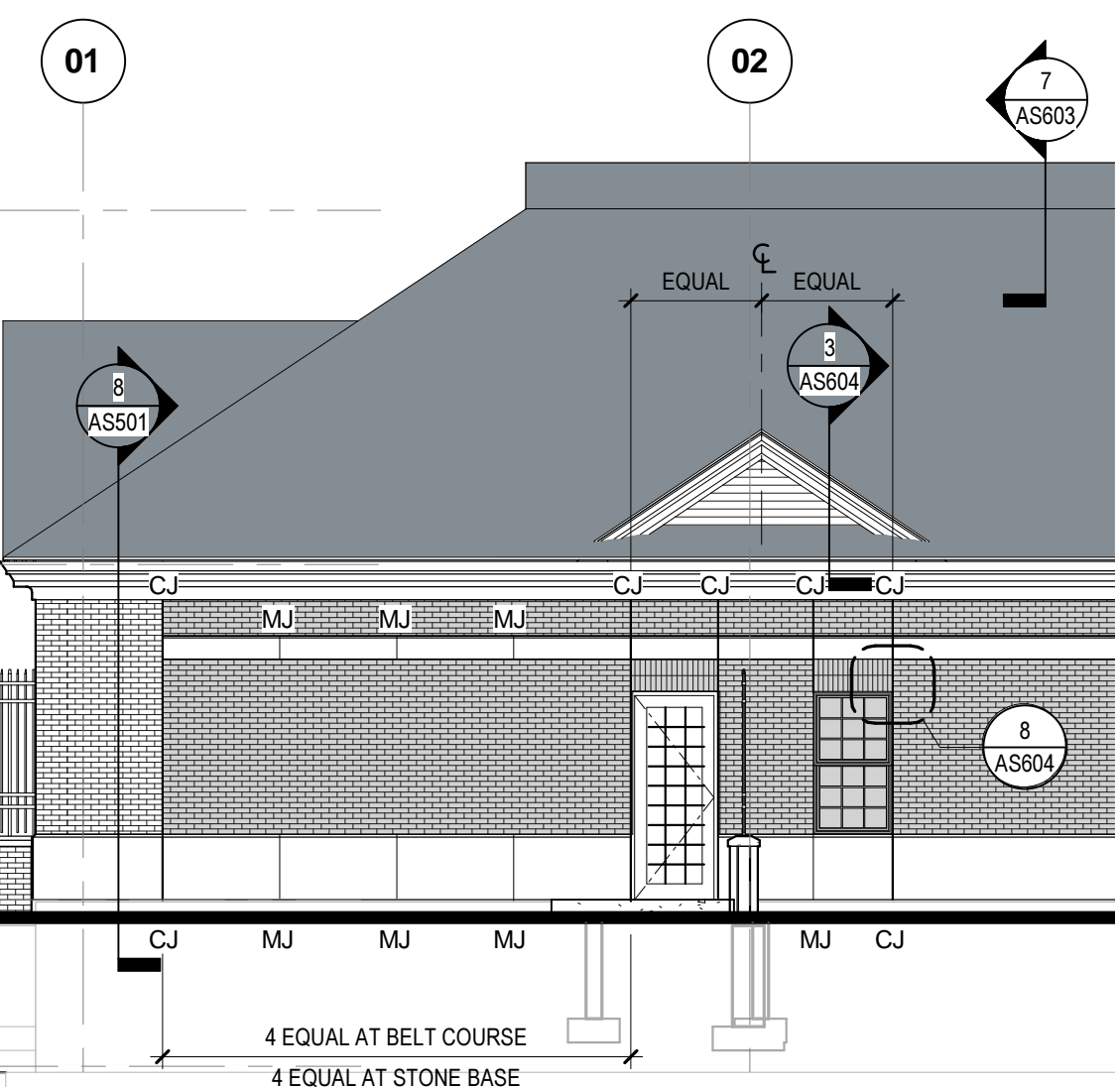
2 WEST ELEVATION  
1/8" = 1'-0"



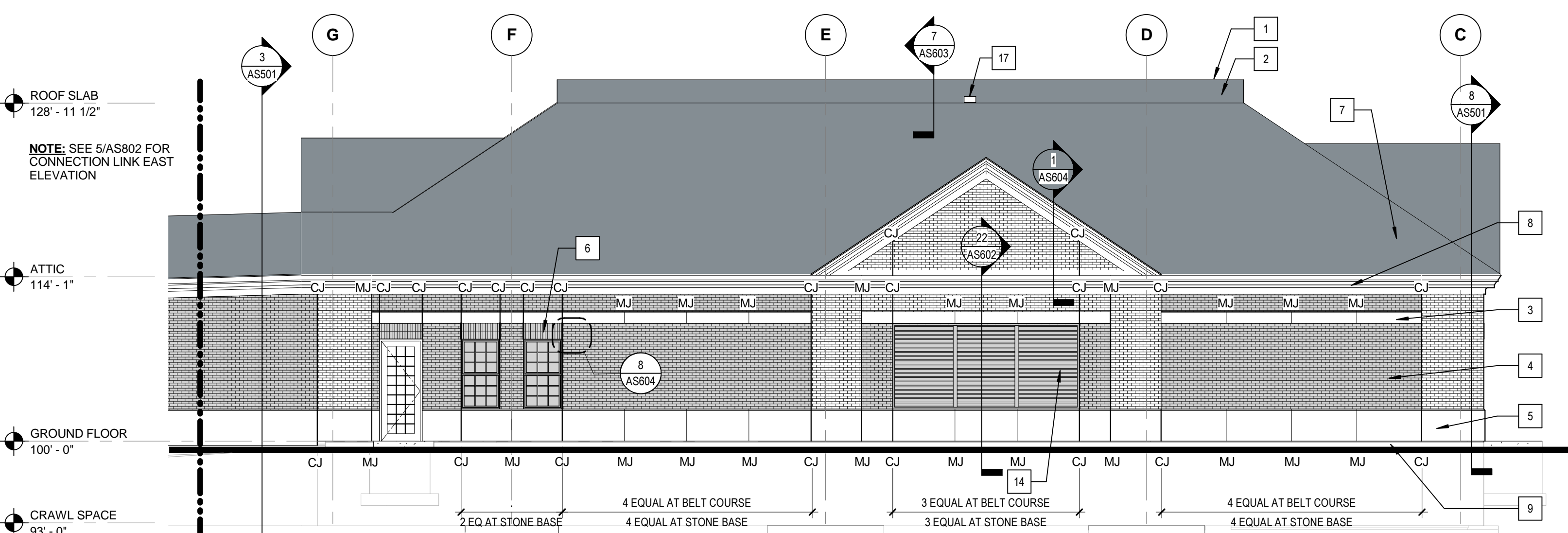
3 PARTIAL WEST ELEVATION  
1/8" = 1'-0"



4 SOUTH ELEVATION  
1/8" = 1'-0"



5 PARTIAL SOUTH ELEVATION  
1/8" = 1'-0"



6 EAST ELEVATION  
1/8" = 1'-0"

**BRICK MASONRY AND CAST STONE JOINT LEGEND**  
SCALE: N/A

CJ = CONTROL JOINT  
MJ = MORTAR JOINT

SEE DETAILS 1, 2, 3, 5 AND 6/AS602  
TYPICAL BETWEEN CAST STONE BASE PANELS AND BELT  
COURSE PANELS EXCEPT AT CONTROL JOINTS. PANELS NOT  
TO EXCEED 15x THICKNESS WITH CONTROL JOINTS NOT TO  
EXCEED 25'-0" O.C.

NOTE: CONTROL JOINTS IN THE FACE BRICK SHALL BE CONTINUOUS FROM THE TOP OF THE CAST STONE PANEL OR THE  
HEAD OF THE WINDOW AS APPLICABLE TO THE TOP OF THE BRICK VENEER. JOINTS IN THE CAST STONE PANEL AND  
BELT COURSE SHALL BE AS INDICATED ON THE ELEVATIONS. REFER TO STRUCTURAL DRAWINGS FOR LOCATIONS OF  
CONTROL JOINTS IN THE CMU BACKING. SHADED BRICK AREAS ARE SETBACK 1" FROM UNSHADED AREAS.

**EXTERIOR ELEVATION KEYNOTES**

Keynote Number	Description
1	PREFINISHED METAL COPING AND FASCIA
2	PREFINISHED METAL WALL CLADDING
3	4-1/2" CAST STONE BELT COURSE
4	4" BRICK VENEER WITH 8" CMU BACKUP
5	5" CAST STONE PANEL
6	DOUBLE SOLDIER COURSE HEADER
7	ASPHALT SHINGLES
8	FORMED PREFINISHED METAL FASCIA AND SOFFIT
9	CONCRETE KNEE-WALL
10	BRICK PIER WITH PRECAST CAP
11	ALUMINUM ORNAMENTAL FENCING
12	PRECAST WALL CAP
13	ARCHITECTURAL ALUMINUM LOUVER (L-1A). SEE SHEET AS301 FOR LOUVER TYPES
14	ARCHITECTURAL ALUMINUM LOUVER (L-1B). SEE SHEET AS301 FOR LOUVER TYPES
15	ARCHITECTURAL ALUMINUM LOUVER (L-2). SEE SHEET AS301 FOR LOUVER TYPES
16	ARCHITECTURAL ALUMINUM LOUVER (L-3). SEE SHEET AS301 FOR LOUVER TYPES
17	ROOF SCUPPER - SEE ROOF PLAN SHEET AS104
18	PROVIDE 3/4" SOFT JOINT BOTH SIDES OF LOW WALL WHERE IT MEETS BUILDING WALL SIMILAR TO 20/AS602. STOP FENCE 3/4" FROM BUILDING WALL WITH END POST. REFER TO STRUCTURAL DRAWINGS FOR BELOW GRADE CONNECTION.
19	SIAMESE CONNECTION - SEE FIRE PROTECTION

100% OWNER REVIEW  
NOT FOR CONSTRUCTION  
12/16/2011



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I hereby certify that this plan, specification or report was prepared by me or under my direct supervision and that I am a duly licensed Architect under the laws of the State of Minnesota.

Signature \_\_\_\_\_  
Registration No. \_\_\_\_\_  
Date \_\_\_\_\_

APPROVED SERVICE LINE DIRECTOR	DATE	APPROVED INFECTION CONTROL NURSE	DATE
APPROVED GENE COORDINATOR	DATE	APPROVED PATIENT SAFETY	DATE
APPROVED PROJECTS SECTION MANAGER	DATE	APPROVED CHIEF OF POLICE	DATE
APPROVED DIRECTOR FMS	DATE	APPROVED SAFETY MANAGER	DATE

EXTERIOR ELEVATIONS			
APPROVED CHIEF OF STAFF	DATE	APPROVED MEDICAL CENTER DIRECTOR	DATE

PROJECT TITLE LONG TERM / INTERMEDIATE PSYCHIATRIC UNIT			
BUILDING No.	CHECKED BY	DRAWN	DATE
103	JIS	SRS	12/16/2011
LOCATION	4801 VETERANS DRIVE, ST CLOUD MN		

DRAWING NO. AS401			
DATE	SCALE	CAD FILE	PROJECT NO.
12/16/2011	As indicated	1032181.DWG	1032181.00

